



## APPLICATION FOR BOARDS AND COMMISSIONS OFFICE OF THE GOVERNOR

**Full Name:** \_\_\_\_\_  
(Please print or type)

**Spouse's Name:** \_\_\_\_\_  
Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

**Home:** \_\_\_\_\_ / \_\_\_\_\_ ( ) \_\_\_\_\_ - \_\_\_\_\_  
**Office:** \_\_\_\_\_ / \_\_\_\_\_ ( ) \_\_\_\_\_ - \_\_\_\_\_  
**Correspondence preference:** Office Home FAX ( ) \_\_\_\_\_ - \_\_\_\_\_

Mr. Mrs. Dr. Ms.  
(Please circle one)

Mr. Mrs. Dr. Ms.  
Phone

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Place of Birth:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

Gender: M F (circle one)

Caucasian \_\_\_\_\_

Hispanic \_\_\_\_\_

Black \_\_\_\_\_

Native American \_\_\_\_\_

Asian/pacific Islander \_\_\_\_\_

### BOARDS/COMMISSIONS OF INTEREST:

(List according to preference)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Political Affiliation: \_\_\_\_\_ Legislative District: \_\_\_\_\_

**CURRENT EMPLOYMENT:** (Title & Company/Agency) \_\_\_\_\_

**EDUCATION:** (Including degrees completed) \_\_\_\_\_

REFERENCES:	Name	Business/Company/Agency	Phone Number
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

### AFFIRMATION OF ELIGIBILITY:

To your knowledge, have any formal charges of professional misconduct, criminal misdemeanor or a felony ever been filed against you in any jurisdiction?

Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please attach explanation.

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of Governor Hull? Or, other information that would embarrass the governor?

Yes \_\_\_\_\_ No \_\_\_\_\_ If so, please attach explanation.

I certify that the facts contained in this application are true and correct to the best of my knowledge. I have reviewed the statutory requirements governing the boards/commissions in which I have expressed an interest and confirm that I meet those requirements. I authorize investigation of all statements contained herein and references listed above to give you any and all information concerning my qualifications and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damages that may result from furnishing the same to you.

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**PLEASE ATTACH RESUMÉ**